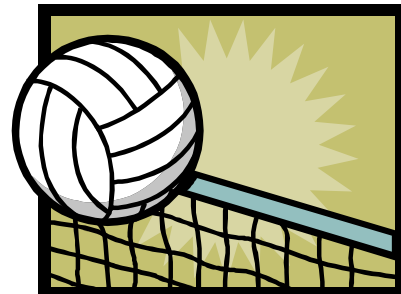


Volleyball

Bump... Set... Spike

Summer Volleyball Program



Offered to kids entering 4th to 8th grade (2012-2013 School Year)

4 Weeks of Instruction for \$60.00

Tuesdays & Thursday, 6:00 to 8:00 pm

July 24^h to August 16th

at the Bridgewater Middle School Gym

This program will focus on all aspects of the game with an emphasis on fundamentals. Skills are reinforced through repetition and skill-building games. Fun and safety are incorporated into a comprehensive instructional program, creating an environment that promotes learning, cultivates a love of the game, and motivates young athletes to achieve their goals. Key skill sets includes, serving, passing, setting, and hitting. Players will also learn basic concepts and strategies of the game.

Head Coach Andrea Salazar - Salazar graduated from Bridgewater finishing as Group 4 State Champions in 2003 and NJ State Champions in 2004, winning the Tournament of Champions. With 8 years of coaching under her belt at Central Jersey Volleyball Academy, Salazar currently serves as Director of Player Development, Head Coach for their 17 National Team, and as Director of their Youth Development program teaching volleyball to youth from ages 7 to 14. Additionally, Salazar is the Assistant Coach for the Woman's Volleyball team at NJCU, as well as Level Coach for Garden Empire's High Performance Program. Andrea will be joined by current and past Bridgewater players.

Space is limited; registration based on first come first serve at the Bridgewater Recreation Department. Three ways to register! In-person at the Bridgewater Recreation Department (100 Commons Way); 9am to 5pm Monday to Thursday 8am to 5pm Friday; drop off registration in the "REC" mail box located on Municipal grounds before or after office hours; or via postal service.

Bridgewater Recreation Department 100 Commons Way - Bridgewater, NJ 08807 908-725-6373 9am to 5pm Monday to Thursday 8am to 5pm Friday www.bridgewaternj.gov.

V=====V
2012 Youth Volleyball

- \$60.00 Check payable to "CJVA"
Sorry - No cash accepted

Last Name	First Name	4	5	6	7	8	
		Circle Grade as of Sept. 2012					

Mailing Address	Town	State	Zip
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Home #	Cell #	Work # Parent
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Email Address	Male or Female
	Circle Gender

If the participant has individualized needs due to a disability, please check the following and someone will contact you regarding reasonable accommodations. « Yes, I will need to be notified regarding special considerations for my child.

Please note that the Bridgewater Township Recreation Department does not provide individual medical insurance coverage for its participants. Each participant will be covered under his/her family's medical policy. It is recommended that families have insurance before the child participates. The Recreation Department reserves the right to cancel, alter, supplement, limit registration or change any other information.

Signature

____/____/____
Date